



2006 Corporation License Tax Return

C
MONTANA
Form CLT-4
Rev. 5-06

For calendar year 2006 or tax year beginning (MM-DD)____-____-**06** and ending (MM-DD-YY)____-____-____

Check if applicable:

- ☐ **Initial Return**
☐ **Final Return**
☐ **Amended Return**
☐ **Refund Return**

NEW

Corporation Name		FEIN _____
Address _____		Federal Business Code _____
If new address check here <input type="checkbox"/>		Incorporated in State of _____
City _____	State _____	Zip+4 _____
		Date _____
		Date Qualified in Montana _____

☐ Check this box if you do not need the Montana corporation license tax return and instructions sent to you next year

Copy of signed Federal Form 1120 as filed with the Internal Revenue Service must be attached

Part I - Filing Method - Check applicable filing method (see instructions)

- a. Separate Company a. ☐
b. Separate Accounting b. ☐
c. Worldwide Combination c. ☐
d. Domestic Combination d. ☐
e. Limited Combination e. ☐
f. Water's Edge (must have a valid election and Schedule WE must be attached) f. ☐
g. Exempt from tax under provisions of Public Law 86-272 (Schedule K must still be completed) g. ☐

Part II - Amended Return Only - Check all that apply.

- a. Federal Revenue Agent Report, a complete copy of this report must be attached a. ☐
b. NOL carryback/carryforward; year of loss. _____ b. ☐
c. Apportionment factor changes (attach a statement explaining all adjustments in detail) c. ☐
d. Amended federal return (Form 1120X); a complete copy of this return must be attached d. ☐
e. Application and/or change in tax credit; type of credit being claimed. _____ e. ☐
f. Other - Attach a statement explaining all adjustments in detail f. ☐

Part III - General Questions - All questions must be answered.

- a. Describe in detail the nature and location(s) of your Montana activities (if necessary, provide the description on an additional page). _____

- b. Is this your corporation's first Montana return? ☐ Yes ☐ No
If this corporation is a successor to your previously existing business, enter name and FEIN of your previous business: _____
- c. Is this your corporation's final Montana return? ☐ Yes ☐ No
If so, indicate whether your corporation has:
☐ Withdrawn; ☐ Merged (please attach detailed statement);
☐ Dissolved (please attach detailed statement); ☐ Reorganized (please attach detailed statement).
Date of withdrawal, dissolution, merger, or reorganization. _____
- d. For any periods, has the Internal Revenue Service issued an official notice of change or correction that you have not filed with the Montana Department of Revenue? ☐ Yes ☐ No
If "yes," indicate the periods that have not been filed. _____
- e. Are any statute of limitation waivers currently in force that have been executed with the Internal Revenue Service? ☐ Yes ☐ No
If "yes," which taxable years are covered and what are the expiration dates of the waivers? _____
- f. Have you filed an amended federal return for any of the last five (5) taxable periods? ☐ Yes ☐ No
If "yes," for which years have you filed amended Montana returns? _____
- NEW** g. Are you filing a combined Montana return (you checked c, d, e or f in Part I above)? ☐ Yes ☐ No
If "yes," enter the number of entities included in this return that are active in Montana. _____

- h. Was your corporation included as a member of a consolidated group for Internal Revenue Service filing purposes? ☐ Yes ☐ No
If "yes," you will need to provide support for your consolidated taxable income by attaching pages 1 through 4 of the consolidated U.S. Corporation Income Tax Return (Form 1120) that you filed with the Internal Revenue Service. Enter the ultimate U.S. parent's FEIN: _____
Enter the ultimate U.S. parent's name: _____
- i. Did an individual at the end of the taxable year own, directly or indirectly, 50% or more of the voting stock of this corporation? Name: _____ % of ownership: _____ ☐ Yes ☐ No
- j. Did a partnership, corporation, estate or trust at the end of the taxable year own, directly or indirectly, 50% or more of the voting stock of this corporation? ☐ Yes ☐ No
- k. If the answer to question (i) or (j) is yes, did the same individual, partnership, corporation, estate or trust at the end of the taxable year also own, directly or indirectly, 50% or more of the voting stock of another (brother-sister) corporation? ☐ Yes ☐ No
- l. Did this corporation or any member of the consolidated group own, directly or indirectly, 50% or more of the outstanding voting stock of a domestic corporation that is not included in the consolidated group referenced in (h) above? ☐ Yes ☐ No
- m. Did this corporation or any member of the consolidated group own, directly or indirectly, 50% or more of the outstanding voting stock of a controlled foreign corporation? ☐ Yes ☐ No
- If you answered "yes" to any of the above questions (j - m), you will need to complete Schedule M.**

Part IV - Reporting of Special TransactionsCheck **"yes"** if you filed any of the following forms with the Internal Revenue Service.

You will need to attach to your Montana return a complete copy of any of these applicable forms.

- a. **I filed federal Form 8264 – Application for Registration of a Tax Shelter with the Internal Revenue Service.** ☐ Yes ☐ No
Form 8264 is required to be filed to register a tax shelter.
- b. **I filed federal Form 8271 – Investor Reporting of Tax Shelter Registration Number with the Internal Revenue Service.** ☐ Yes ☐ No
Form 8271 is used to report the tax shelter registration number that the Internal Revenue Service assigns to certain tax shelters required to be registered under 26 USC 6111 and to report the name and identifying number of the tax shelter.
- c. **I filed federal Form 8824 – Like-Kind Exchanges with the Internal Revenue Service.** ☐ Yes ☐ No
Check "yes" if your like-kind exchange includes Montana property.
Form 8824 is used to report each exchange of business or investment property for property of a like-kind.
- d. **I filed federal Form 8865 – Return of U.S. Persons With Respect to Certain Foreign Partnerships with the Internal Revenue Service.** ☐ Yes ☐ No
Form 8865 is used to report the information required under 26 USC 6038 (reporting with respect to controlled foreign partnerships), section 6038B (reporting of transfers to foreign partnerships), or section 6046A (reporting of acquisitions, dispositions, and changes in foreign partnership interest.)
- e. **I filed federal Form 8886 – Reportable Transaction Disclosure Statement with the Internal Revenue Service.** ☐ Yes ☐ No
Form 8886 is used to disclose information for each reportable transaction in which you participated.
- f. **I filed federal Form 13657 - Notice of Election by Corporation to Participate in Announcement 2005-19 Settlement Initiative with the Internal Revenue Service.** ☐ Yes ☐ No
Form 13657 is an election to participate in the settlement initiative as described in Announcement 2005-19 and as contained in Internal Revenue Bulletin 2005-11 dated March 14, 2005.
- NEW** g. **I filed federal Form 13750 – Election to Participate in Announcement 2005-80 Settlement Initiative with the Internal Revenue Service.** ☐ Yes ☐ No
Form 13750 is an election to participate in the settlement initiative as described in Announcement 2005-80 and as contained in Internal Revenue Bulletin 2005-46 dated November 14, 2005.

Declaration - Under penalties of perjury, I, the undersigned officer of the corporation, declare that to the best of my knowledge and belief, this return and accompanying schedules are a true, correct, and complete return made in good faith for the income period stated above, pursuant to Montana corporation license tax law and regulations.

Signature of officer

Date

Print name

Title

Telephone number, ext.

Name of person or firm preparing return

Date

Preparer's identification number

Telephone number

☐ Check here to authorize the Montana Department of Revenue to discuss your return with the individual/preparer listed above.

Computation of Montana Taxable Income and Net Amount Due

1. Taxable income reported on your federal return (line 28) (attach a copy of signed federal Form 1120)	1.	
2. Additions:		
2a. Montana corporation license tax (attach breakdown of your Form 1120, line 17) ..	2a.	
2b. Other state, local, foreign, and franchise taxes based on income	2b.	
2c. Federal tax exempt interest	2c.	
2d. Contributions used to compute qualified endowment credit	2d.	
2e. Income/loss of foreign subsidiaries for worldwide combined filers	2e.	
2f. Income/loss of unitary corporations not included in federal consolidated return ...	2f.	
2g. Extraterritorial income exclusion	2g.	
2h. Deemed dividends (Water's Edge filers only.) (attach Schedule WE)	2h.	
2i. Federal capital loss carry-over utilized on federal return	2i.	
2j. All of your other additions (attach a detailed breakdown)	2j.	
Add lines 2a through 2j and enter the result. This is the total of your additions	2.	
3. Reductions:		
3a. IRC Section 243 dividend received deduction	3a.	
3b. Non-business income (attach a detailed breakdown)	3b.	
3c. Montana recycling deduction (attach Form RCYL)	3c.	
3d. Income/loss of nonunitary corporations included in federal consolidated return ...	3d.	
3e. Capital loss incurred in current year (attach federal Schedule D)	3e.	
3f. All of your other reductions (attach a detailed breakdown)	3f.	
Add lines 3a through 3f and enter the result. This is the total of your reductions	3.	
4. Add lines 1 and 2, then subtract line 3 and enter the result. This is your adjusted taxable income	4.	
5. Income apportioned to Montana (multiply line 4 X _____ % from Schedule K, line 5) and enter the result. ...	5.	
Combined filers must use the schedule outlined in the instructions.		
6. Enter the income that you allocated directly to Montana (attach a detailed breakdown)	6.	
7. Montana taxable income before net operating loss (add lines 5 and 6 or enter amount reported on line 4) ...	7.	
If line 7 is a loss, do you wish to forego the net operating loss carry-back provision? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Note: If you have reported a loss on line 7 and have checked neither box, the loss first has to be carried back.		
8. Enter your Montana net operating loss carried over to this period (attach a detailed schedule)	8.	
9. Subtract line 8 from line 7 and enter the result here. This is your Montana taxable income	9.	
10. Multiply line 9 by 6.75% (or line 9 by 7% if you have a valid Water's Edge election). This is your Montana tax liability	10.	
Note: This amount cannot be less than the minimum tax liability of \$50.		
Check this box if you are calculating your tax liability using the Alternative Tax method. <input type="checkbox"/>		
11. Payments:		
11a. 2005 overpayment	11a.	
11b. Tentative payment	11b.	
11c. Quarterly estimated tax payments	11c.	
11d. All other payments. Describe	11d.	
11e. Previously issued refunds. Describe	11e.	()
Add lines 11a through 11e and enter the result. This is the total of your payments	11.	
12. Enter total credits (from Schedule C)	12.	
13. Add lines 11 and 12, then subtract from line 10 and enter result. This is your tax due or overpayment ...	13.	
14. Enter the amount of overpayment that you want to be applied to your 2007 estimated tax	14.	
15. Add lines 13 and 14 and enter the result. This is your net tax due or overpayment	15.	
16. Enter interest on all the tax paid after the due date, calculated at 12% per year, on a daily basis	16.	
17. Enter estimated tax underpayment interest (attach Form CLT-4-UT)	17.	
Check box if you are using the annualized income or adjusted seasonal income method. <input type="checkbox"/>		
18. Penalty:		
18a. Enter your late filing penalty (see instructions)	18a.	
18b. Enter your late payment penalty (see instructions)	18b.	
Add lines 18a and 18b and enter the result. This is your total penalty	18.	
19. Add lines 15 through 18 and enter the result. This is your total due or overpayment.		
19a. If the result is positive, enter the amount due here	19a.	
19b. If the result is negative, enter the refund due here	19b.	

Please attach your remittance payable to the Montana Department of Revenue or visit our website at mt.gov/revenue to pay online by Business Tax Express.

Copy of signed federal Form 1120 must be attached.

Mail to: Montana Department of Revenue, PO Box 8021, Helena, MT 59604-8021

Schedule K - Apportionment Factors for Multi-state Taxpayers

FEIN _____ Period End Date _____

Enter dollar values in columns A and B. Enter percentages in column C.

	A. Everywhere	B. Montana	C. Factor
1. Property Factor: Enter average values for real and tangible personal property			
1a. Land	1a.		
1b. Buildings	1b.		
1c. Machinery	1c.		
1d. Equipment	1d.		
1e. Furniture and fixtures	1e.		
1f. Leased property	1f.		
1g. Inventories	1g.		
1h. Supplies and other	1h.		
1i. Property of foreign subsidiaries included in combined unitary group	1i.		
1j. Property of unconsolidated subsidiaries included in combined unitary group	1j.		
1k. Property of pass-through entities included in combined unitary group ..	1k.		
1l. Multiply amount of rents by 8 and enter result	1l.		
Total Property Value add lines 1a through 1l			
Take the total in column B and divide it by the total in column A. Multiply that result by 100 and enter the result. This is your property factor 1. %			
2. Payroll Factor:			
2a. Compensation of officers	2a.		
2b. Salaries and wages	2b.		
Payroll included in:			
2c. Costs of goods sold	2c.		
2d. Repairs	2d.		
2e. Other deductions	2e.		
2f. Payroll of foreign subsidiaries included in combined unitary group	2f.		
2g. Payroll of unconsolidated subsidiaries included in combined unitary group	2g.		
2h. Payroll of pass-through entities included in combined unitary group ..	2h.		
Total Payroll Value add lines 2a through 2h			
Take the total in column B and divide it by the total in column A. Multiply that result by 100 and enter the result. This is your payroll factor 2. %			
3. Sales (Gross Receipts) Factor:			
3a. Gross sales, less returns and allowances	3a.		
3b. Sales delivered or shipped to Montana purchasers:			
(1) Shipped from outside Montana	3b.(1)		
(2) Shipped from within Montana	3b.(2)		
3c. Sales shipped from Montana to:			
(1) United States Government	3c.(1)		
(2) Purchasers in a state where the taxpayer is not taxable	3c.(2)		
3d. Sales other than sales of tangible personal property (i.e. service income)	3d.		
3e. Less: Intercompany sales	3e.	() ()	
3f. Net gains reported on federal Schedule D and federal Form 4797	3f.		
3g. Other gross receipts (rents, royalties, interest, etc)	3g.		
3h. Sales (receipts) of foreign subsidiaries included in combined unitary group	3h.		
3i. Sales (receipts) of unconsolidated subsidiaries included in combined unitary group	3i.		
3j. Sales (receipts) of pass-through entities included in combined unitary group	3j.		
3k. Less: Other intercompany transactions	3k.	() ()	
Total Sales Value add lines 3a through 3k			
Take the total in column B and divide it by the total in column A. Multiply that result by 100 and enter the result. This is your sales factor 3. %			
4. Add the percentages on lines 1, 2, and 3 in column C. This is the sum of your factors 4. %			
5. Divide the total percentage on line 4, column C, by the number of factors that can be included in the calculation. If there is a value in column A for a factor category (Property, Payroll, or Sales), the factor is included in the calculation (see instructions).			
Enter the results here and also insert in Form CLT-4, page 3, line 5. This is your apportionment factor 5. %			

Schedule C - Tax Credits

FEIN _____ Period End Date _____

Type of Credit	Column A Current Year Earned	Column B Total Available	Column C Current Year Applied
1. Montana Capital Company Credit			
2. New/Expanded Industry Credit			
3. Interest Differential Credit			
4. Montana Dependent Care Assistance Credit (attach Form DCAC)			
5. Montana College Contribution Credit (attach Form CC)			
6. Health Insurance for Uninsured Montanans Credit (attach Form HI)			
7. Montana Recycle Credit (attach Form RCYL)			
8. Alternative Energy Production Credit (attach Form AEPC)			
9. Contractor's Gross Receipts Tax Credit (attach supporting schedule)			
10. Alternative Fuel Credit (attach Form APCR)			
11. Infrastructure Users Fee Credit			
12. Qualified Endowment Credit (attach Form QEC)			
12a. Qualified Endowment Credit Recapture			()
13. Historical Buildings Preservation Credit (attach federal Form 3468)			
13a. Historical Buildings Preservation Credit Recapture			()
14. Increase Research and Development Activities Credit (attach Form RSCH)			
15. Mineral Exploration Incentive Credit (attach Form MINE-CRED)			
16. Developmental Disability Account Contribution Credit			
17. Empowerment Zone Credit			
18. Film Production Credit (attach Form FPC)			
19. Biodiesel Blending and Storage Credit (attach Form BBSC)			
20. Oilseed Crushing and Biodiesel Production Credit (attach Form OSC)			
NEW 21. Geothermal System Credit (attach Form ENRG-A)			
NEW 22. Insure Montana Credit			
Add totals of lines 1 through 22 and enter the result here. This is the total of your credits. Enter the total in column C on Form CLT-4, page 3, line 12.			

To receive these credits, you will have to attach this schedule C and your prescribed corporation tax forms or a detailed schedule to your CLT-4.

Send your completed Montana Corporation License Tax Return to the following address:
Montana Department of Revenue, PO Box 8021, Helena, MT 59604-8021